

## CitiCABLE Questionnaire – Team Name: \_\_\_\_\_

Answer only the questions that you want to. This information may be shared by the announcers during your video taped game.

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Jersey #: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Birthday: \_\_\_\_\_

Favorite sport: \_\_\_\_\_

Favorite team: \_\_\_\_\_

Favorite athlete: \_\_\_\_\_

Favorite movie: \_\_\_\_\_

Favorite type of music: \_\_\_\_\_

Favorite color: \_\_\_\_\_

Favorite subject in school: \_\_\_\_\_

Hobbies: \_\_\_\_\_

How tall do you expect to be when you grow up? \_\_\_\_\_

What do you want to be when you grow up? \_\_\_\_\_

Favorite number: \_\_\_\_\_

Who do you want to say hello to? \_\_\_\_\_

Do you participate in other City of Torrance programs? \_\_\_\_\_

Please use the back of this page to share additional information.

Parent/Guardian approval: \_\_\_\_\_ Date: \_\_\_\_\_